

## PERSON CENTERED INTERVENTION

### *Blank Sample Form*

#### Evaluation of Effectiveness of the Intervention in Meeting Goals Social Interactions that Recognize and Support Remaining Abilities

Resident Name:

Date:

Facility:

Desired outcomes and benefits:	Residents will:  1. Engage in social interaction with a visitor during weekly visit 2. display one or more of the indicators of well being during the visit
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Goal for this resident:

- To meet identified need:
- Or support identified strength:

**Check appropriate answer:**

Were resident goals met?	Yes	No	Outcomes / Benefits
1. Engage in social interaction with a visitor			
2. Display one or more of the indicators of well being			

3. Discounting intervention after \_\_\_\_\_ times because:

4. Modifications to intervention that worked for this group

a)

b)

5. Unanticipated results of intervention:

Other Comments:

Signature:

Date: